

Electronic National Medical Support Notice Appendix F

Software Interface Specification

Version 1.6
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Revision History

Date	Revision	Section	Author
3/29/2021	v1.0: Original release	Entire document	H. Rallapalli
6/29/2021	v1.1: Minor updates	No changes were made to Appendix F.	H. Rallapalli
8/18/2021	v1.2: Minor updates	No changes were made to Appendix F.	H. Rallapalli
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4/20/2022	v1.4: Minor Updates		M. Stanczyk
1/27/2023	v1.5: Split document body and appendices into separate files	Entire document	J. Vierow
8/23/2023	V1.6: Minor Updates	The dates that the Portal pushes the FEIN file were changed to the 8th and 25th of each month.	M. Stanczyk

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F e-NMSN FEIN Push

Currently, employers, third-party providers, and plan administrators provide the Federal Employer Identification Number (FEIN) in an Excel worksheet for all the subsidiaries they will receive and respond to National Medical Support Notice (NMSN) orders. These FEINs and the relationships between the organizations are then stored on the e-NMSN Office of Child Support Services (OCSS) system and sent to states so states will know which FEINs to use for each employer.

Employers and third-party providers must keep their FEIN information up-to-date to receive e-NMSNs for only the companies and organizations they process medical support notices. It is also critical that states receive the latest FEIN information for all employers and third-party providers to ensure they send e-NMSN orders only to FEINs for companies and organizations specified in the employers or third-party providers' FEIN list. This process provides states with active and inactive FEINs participating in the e-NMSN process.

To accommodate the need for an automated solution for receiving and sending FEIN information, an FEIN Push process was developed. States can receive FEIN information electronically in the FEIN file layout described in Chart F-1. States choosing to receive FEIN information from this automated process must provide a filename in the e-NMSN Profile so the information can be sent to them in the specified file. For more information about the FEIN Push filename, see section F.1, FEIN Push File and Format.

Currently, states can only receive FEIN file information through this FEIN Push process. The Portal pushes the FEIN file on the 8th and 25th of each month.

An FEIN Report file is created by the Portal for any state to use. This file contains active and inactive employer FEINs. When an employer notifies the Portal that it no longer processes e NMSNs for a particular FEIN, this FEIN is categorized as inactive.

F.1 FEIN Push File and Format

This section describes all components of the FEIN file pushed to states. This includes a data element description, the file layout and format rules, an example FEIN file, and file naming conventions.

The FEIN file is generated in a fixed-length format. Chart F-1 specifies the lengths and locations of each data element in the file.

The following list is a summary of the formatting rules:

- Each employer's data is on a separate line.
- Each data element has a fixed length.
- Data elements on the FEIN Push file are in the same order they appear in the e-NMSN FEIN Push file.

F.2 e-NMSN FEIN Push File Record

Chart F-1 contains a description of the fields included in the e-NMSN FEIN Push File Record layout.

Chart F-1: e-NMSN FEIN Push File Record Layout				
Field Name	Length	Location	A/N	Comments
FEIN	9	1-9	N	Required. Employer's FEIN.
Start Date	8	10-17	N	Required. The date the employer will begin to exchange e-NMSN orders. Must be in CCYYMMDD format.
Employer Name	100	18-117	A/N	Required. Name of the employer.
Address Line 1	100	118-217	A/N	Required. The employer's printed form address.
Address Line 2	100	218-317	A/N	Optional. The employer's printed form address.
Address Line 3	100	318-417	A/N	Optional. The employer's printed form address.
City	30	418-447	A/N	Required. The employer's printed form city code.
State	2	448-449	A	Required. The employer's printed form state code.
Zip Code	5	450-454	N	Required. The employer's ZIP code.
ZIP Code Extension	4	455-458	N	Optional. The employer's ZIP code extension.

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Chart F-1: e-NMSN FEIN Push File Record Layout

Field Name	Length	Location	A/N	Comments
Contact Name	50	459-508	A/N	Required. Business contact's full name. Valid special characters: Hyphens (-) Apostrophes (') Periods (.) Space The first character cannot be a space.
Phone Number	10	509-518	N	Required. The business contact's phone number.
Phone Number Extension	6	519-524	N	Optional. The business contact's phone extension.
Email	65	525-589	A/N	Required. The business contact's email address.
Active/Inactive Indicator	1	590-590	A	Required. Indicates whether the FEIN is active or inactive for the e-NMSN system. Valid values: A - Active I - Inactive
Inactive Date	8	591-598	N	Conditionally required: required if the Active/Inactive Indicator field is I. The date the FEIN became inactive in the e-NMSN system. Must be in CCYYMMDD format.
Organization Known As Name	20	599-618	A/N	Optional. The name an organization may be known as in addition to its legal business name.